PTO/SB/17 (10-07)
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Effective on 12/08	l	Complete if Known Application Number 10/540,944-Conf. #3801				
Fees pursuant to the Consolidated Approp				100		
FEE TRANS	Filing Date		June 29, 2005			
For FY 20	First Named Inv		Takao WATANABE			
	Examiner Name S. M. Marsh					
Applicant claims small entity stat	Art Unit					
TOTAL AMOUNT OF PAYMENT	Attorney Docket	Attorney Docket No. 1152-0319PUS1				
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify):						
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
FI		EARCH FEES	EXAMINA	ATION FEES		
Application Type Fee (\$	Small Entity S) Fee (\$) Fee	Small Entity (\$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Ease F	Paid (\$)
Utility 310	155 51		210	105	1 663 1	aiu (a)
Design 210	105 10		130	65		
Plant 210	105 31		160	80		
Reissue 310	155 51		620	310		
Provisional 210		0 233	020	.510		
2. EXCESS CLAIM FEES	105	0	U	٧		Small Entity
Fee Description Each claim over 20 (including Reissues)					Fee (\$) 50	Fee (\$) 25
Each independent claim over 3 (including Reissues)					210	105
Multiple dependent claims					370	185
			Mid	Itiple Depende		103
				ee (\$) Fee Paid (\$)		
HIP = highest number of total claims paid for, if greater than 20.						
Indep. Claims Extra Claims	Fee (\$) Fe	Paid (\$)				
x =						
HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid -100 = /50 = (round up to a whole number) x =						Paid (\$)
4. OTHER FEE(S) Fees Paid (\$)						
Non-English Specification. \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00						
SUBMITTED BY On- on I						
Signature Signature		Registration No.	39,491	Telephone	(703) 20	5.8000
Name (Print/Type) Michael R. Cammarata			38,481	Telephone (703) 205-8000 Date March 12, 2009		
March 12, 2009						